FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

TITLE

NAME STREET ADDRESS N95000000974 (4)

CORNERSTONE BAPTIST CHURCH OF OCALA, INC.

FILED Jul 16 1998 8:00am Secretary of State

- P (BANNIA) AND 1810) BURK DOWN HOUSE AND A BORN BORN (BURK AND 10 1011) INDEX AND IN

Change

307-9818

☐ Addition

													1811 BLE1 1881	
Principal Place of Business Mailing Address									1 (400(1)B1 610 10101 01111 00111 00111 00111 00111		toffi (i	FOR VEGE (VO)		
8862 SE 59 AVENUE P.O. BOX 870 OCALA FL 34472 SILVER SPRINGS FL 34489 US US										Date Incorporated or Qualified 02/28/1995 FEI Number 59-3270289		+	plied For	
2. Principal Place of Business 2a. Mailing Address											\$8		Additional	
21				26					5.	Certificate of Status Desired	T		quired	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				6.	Election Campaign Financing	\$5.	00 N	Лау Ве		
22				27						Trust Fund Contribution			Fees	
City & State				City & State					7.	Is this nonprofit corporation a homeown		ciation	1?	
23				28					☐ Yes ☑ No					
Zip	Country			- · —			Country		8.	This corporation owes or has paid the co				
24	6 Name	25 s and Address of Curre	29	lored Agent	30				10	Personal Property Tax due June 30. Name and Address of New Registered	Yes Agent	<u>LV</u>) No	
<u> </u>	T. Mailin	B BIIG AUGIDAS OI CUITO	iit negis	Italan Malit		81	Nam	IA	10.	Maline and Address of New Registered	Agent			
DUDUAN	A LADDY													
DURHAM, LARRY						82 Street Add			ss (F	P.O. Box Number is Not Acceptable)				
2601 SE 38TH STREET OCALA FL 84471						83								
UCALA	ru 04471						ļ							
	;					84	City			Fi	_ 85	Zip (Code	
office or re agent. I at SIGNATURE	egistered a m familiar v	gent, or both, in the State with, and accept the oblig	e of Florid gations of	da. Such change was f, Section 617.0503, F	authoriz Iorida St	ed by atutes	y the cos.	orporatio	n's t	on submits this statement for the purpose board of directors. I hereby accept the ap	of chang pointmen	ing it: nt as	s registered registered	
12.	Signature, typed or printed name of registered agent a OFFICERS AND I						pistered Agent signature required 13.			n reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TOR	S IN 12	
TITLE	PD	OFFICENS AN	D DIREC	DELETE		TITLE		Τ	<u>'</u>	ASSITIONS/OFFICE TO OFFICE TO	☐ Cha		Addition	
NAME		M, LARRY		_		NAME		-				-	_	
STREET ADDRESS		E 38TH STREET					ADDRES	s Í						
CITY-ST-ZIP		FL 34471				CITY-S								
TITLE	٧D			DELETE		TITLE				-	☐ Cha	ange	Addition	
NAME	OLSON	I, JEFF C			2.2	NAME								
STREET ADDRESS		E 88TH STREET			2.3	STREET	ADDRES	s						
CITY-ST-ZIP	OCALA	FL 34472			2.4	CITY-S	ST-ZIP			Land Control				
TITLE	\$TD			DELETE	3.1	TITLE					Cha	ange _	Addition	
NAME		er, william j			3.2	NAME		-						
STREET ADDRESS	\$640 SE 23RD LANE			3.3 ST			ADDRES	s						
CITY-ST-ZIP	O CALA	FL 34471				3.4. CITY-ST-ZIP								
TITLE				☐ DELETE		TITLE					L Cha	inge	Addition	
NAME					9	NAME								
STREET ADDRESS	-				•		ADDRES	s						
CITY-ST-ZIP				DELETE	~	CITY-S	T-ZIP				I nt.	NAC	Addition	
TITLE				☐ DELETE		TITLE					Cha	anye	Addition	
NAME						NAME	. 1000	,						
STREET ADDRESS							ADDRES	s						
CITY-ST-ZIP					5.4	CITY-S	T-ZIP							

6.1 TITLE 6.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

William J. Brewer

DELETE